APPLICATION FOR UNITED STATES PATENT **Declaration and Power of Attorney**

As a below named inventor, I hereby declare that:

1713	residence, post offic	e address and citi	zensnip are as state	d below next to my name	; that	
1 AUDI	ventors are named bei	ow) of the subjec LEXED DATA G	t matter which is cl	aimed and for which a na	d below) or an original, first and tent is sought on the invention of ING APPARATUS AND MOVI	entitled: ING VIDEO
Check one	id claimed in the spec	incation:			DECODING APPARATUS	3
*2	[x] attached hereto.					
ъ.	[] filed on	as	Application Serial	No. an	d amended on	•
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by any ame	ndment referred to about	ove.	iderstand the conter	its of the above-identified	application, including the claim	is, as amende
accordance	cknowledge the duty with Title 37, Code of s) filed within one year	f Federal Regulati	ons, $\S1.56(a)$. Unde	er Title 35 U.S. Code §119	rial to the examination of this 9, the priority benefits of the following the priority benefits of the following the following the priority benefits of the following the priority benefits of the priority bends of the priority benefits of the priority benefits of the prio	application in
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2 If there ar insert "NO	e no corresponding a NE". NONE	pplications,				
I he to transact a	ereby appoint the follo	owing as my attorrent Office:	neys of record with f	full power of substitution a	and revocation to prosecute this a	pplication and
Ro	ger W. Parkhurst, Reg	g. No. 25,177; Ch	arles A. Wendel, Re	eg. No. 24,453; and/or La	wrence D. Eisen, Reg. No. 41,00	09
TO PAR	LL CORRESPO KHURST & WI e: (703) 739-022	ENDEL, L.L.	CONNECTIO P., 1421 Princ	N WITH THIS AP e Street, Suite 210	PLICATION SHOULD , Alexandria, Virginia 2	BE SENT 2314-2805
with the kno	re true and that all sta wledge that willful fa	atements made on ilse statements and	information and be d the like so made a	lief are believed to be true are punishable by fine or	nd that all statements made here e; and further that these statemer imprisonment, or both, under Se of the application or any patent is	nts were made
• •	n Full Name of st Inventor	Yo	riko		Yagi	
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*4 Inventor's	Signature 🖙		guko		gago	
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^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to the Inventor. Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

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Second Joint Invent	or (ii any)		Given Name	Middle Initial	Funahashi Family Name	
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of the application to which it pertains.